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TRANSMITTAL FORM			Filia Data			09/936,587			
						August 18, 2004			
			First Named Inventor		Luthra, et al.  Biocompatible Endoprostheses				
			Art Unit						
			Examiner Name		Vy Q. Bui				
Total Number of Pages in This Submission 2			Attorney Docket Number	er	66230-8416				
ENCLOSURES (Check all that apply)									
Fee Transmittal Form	n		Drawing(s)				After Allov	wance Communication to TC	
Fee Attached		Licensing-related Papers						ommunication to Board	
The Commissioner is	F	Petition				• •	s and Interferences ommunication to TC		
ized to charge any additional fees which may be required, or credit any over-payment, to Deposit Account Number 20-0823. I have enclosed			Petition to Convert to a Provisional Application  Power of Attorney or Authorizatio					ice, Brief, Reply Brief)	
							Proprieta	y Information	
a duplicate copy of t	Agent					Status Le			
Amendment/Reply	• •		Terminal Disclaimer			_	Other End below):	closure(s) (please identify	
After Final		Request for Refund				postcard			
Affidavits/declarations(s)		CD, Number of CD(s)							
Extension of Time Request		Landscape Table on CD							
Express Abandonment Request  Information Disclosure Statement		Remarks							
Certified Copy of Priority Document(s)		·							
Reply to Missing Parts/ Incomplete Application									
Reply to Missi under 37 CFF									
	SIGNAT	URE C	OF APPLICANT, AT	TORN	EY,	OR AC	ENT	<u></u>	
Firm Name	Thompson Cob	urn LL	.P						
Signature	last								
Printed name	Kenneth Solom								
Date	July 7, 2006			Reg. N	. No. 31,427				
	CERTIFICATE OF TRANSMISSION/MAILING								
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Signature	aul								
Typed or printed name	yped or printed name Kenneth Solomon						Date	July 7, 2006	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/81 (02-01) Approved for use through 10/31/2002. OMB 0851-0035
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> Vy Q. Bui 66230-8416

	Filing Date	August 18, 2004		
POWER OF ATTORNEY OR	First Named Inventor	Luthra et al.		
AUTHORIZATION OF AGENT	Title	Biocompatible Endoprostheses		
CONTRACTOR OF MODITY	Group Art Unit	3731		

Examiner Name

Attorney Docket Number

Application Number

I hereby appoint: Place Customer Practitioners at Customer Number 021888 Number Bar Code OR Label Here Practitioner(s) named below: Name Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Firm or Kenneth Solomon Individual Name **Address** Thompson Coburn LLP Address One US Bank Plaza City St. Louis State MO 63101-9928 Zip Country USA 314-552-6000 Telephone Fax 314-552-7000 I am the: Applicant/Inventor. 冈 Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record LUTHRA of Biointeractions Ltd. Signature .6.06 NOTE: Signatures of all the Inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

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